

Buffet luncheon at 12:30 p. m. at the University of California Hospital, for all doctors registered for the symposium and for all symposium instructors.

On Thursday evening, November 16, the Heart Committee will celebrate its tenth anniversary with a dinner at the Western Women's Club. A special program has been arranged. Dr. William Dock will speak on "The Treatment of Heart Disease Since Queen Bess." A cordial invitation is extended to all doctors and their friends who may wish to attend. The dinner is \$1.65 per plate.

On Friday, November 17, the sessions will be held at Stanford University Hospital.

Morning Session

Ann P. Purdy, M. D., Presiding.

Demonstration of Patients with Various Types of Cardiac Disorders, by Arthur L. Bloomfield, M. D., William W. Newman, M. D., and Ann P. Purdy, M. D.
Clinico-Pathologic Demonstrations, conducted by William Dock, M. D.

Afternoon Session

J. K. Lewis, M. D., Presiding.

The Use of Physical Therapy in the Treatment of Peripheral Vascular Disease, by W. H. Northway, M. D.
Use of the Epinephrin-Ephedrin Group of Drugs in Cardiovascular Disease, by M. L. Tainter, M. D.
Heart Size and Heart Failure, by D. A. Rytand, M. D.
The Electrocardiograph in the Differential Diagnosis of Acute Myocardial Infarction, Acute Cor Pulmonale and Acute Pericarditis, by Jackson Norwood, M. D.
The Value of Phonocardiograms, by J. K. Lewis, M. D.

Evening Session at San Francisco Hospital

J. Marion Read, M. D., Presiding.

The Observation of Cardiac Motion by Roentgen-Kymography, by Leo H. Garland, M. D.
Some Clinical Applications of Roentgen-Kymography, by J. Marion Read, M. D.
Therapeutic Use of Digitalis, by Clayton D. Mote, M. D.
Effort Syndrome—Diagnosis and Treatment, by Mayo H. Soley, M. D.
Pregnancy and Heart Disease, by Charles A. Noble, Jr., M. D.
Demonstration of Pulmonary Vascular Tree by Topography, by Alexander Petrilli, M. D.

The registration fee for the symposium, including the anniversary dinner, is \$15. Registration applications and dinner reservations should be sent to Dr. Richard D. Friedlander, Chairman of Program Committee, San Francisco Heart Committee, 604 Mission Street, Room 802, San Francisco.

Urges Victims Themselves to Fight Ragweed Menace. Hay-fever victims could do much to rid themselves of their misery by concerted attempts at eradicating ragweed, Ramsay Spillman, M. D., New York, declares in *Hygeia*, the health magazine.

While persons susceptible to the pollen of ragweed cannot go near it during the blooming season, Doctor Spillman points out that there is a period comprising all of May, June and July and part of August, when the bloom has not formed, during which even sensitive persons can handle the plant, which is extremely easy to pull up.

"Concerted and organized action by the victims, themselves, would prevent much of their suffering later," he asserts. "But it is a sheer waste of money to cut down ragweed after it has formed viable seed."

Doctor Spillman says that, with the help of three neighbors, he cleaned off the ragweed from a lot comprising nearly a whole city block. The following year there was still a little left, as enough seed had carried over in the ground to give a yield of perhaps 10 per cent of the ordinary crop. The third year, however, there was only a scattered growth of ragweed.

LETTERS

Subject: Cancer Commission Pathological Conference.*

CALIFORNIA MEDICAL ASSOCIATION

CANCER COMMISSION

SAN FRANCISCO

October 18, 1939.

To the Editor:—We would appreciate it if the enclosed announcement could be put in the next issue of CALIFORNIA AND WESTERN MEDICINE.

Very truly yours,

OTTO H. PFLUEGER, M. D.

(COPY)

CANCER COMMISSION PATHOLOGICAL CONFERENCE

Dear Doctor:

The next Microscopic Conference of the Cancer Commission of the California Medical Association will be held at the Alameda County Hospital in Oakland on Sunday, December 17, at 9:30 a. m.

In order that the committee in charge of the Conference—Doctors Paul Michael, Jesse Carr, and Alvin Cox—may go over the cases that are sent in, we are asking that if you have a case which you would like to present, that you send in two or three sample slides and a case history for the Committee's perusal as soon as possible.

If a case is accepted, the Committee will notify you and ask that you make up a set of sixty slides for distribution. The Committee is particularly anxious to obtain slides which are made of properly fixed material so that the slides will be satisfactory for diagnosis.

We are interested in getting the cases ready several weeks before the meeting, and would appreciate receiving sample slides and histories as early as possible. We feel that if slides can be sent to the pathologists throughout the state at least two weeks before the meeting, the cases can be diagnosed more satisfactorily and the discussion will be much more interesting. In the past, material has always been sent in so late that it has been difficult to get the slides out, and some of the participants have had to go without slides.

Will you kindly give this matter your prompt attention in order that we may make the program as interesting as possible? Kindly send your preliminary histories and slides to the chairman of the committee, Dr. Paul Michael, 434 Thirtieth Street, Oakland, California. He will get in touch with you concerning the cutting of sixty sections if your cases are accepted.

Bring your own microscope if you plan to attend. Also let the Chairman know if you will attend, as accommodations are limited.

Subject: Premarital examinations.

(COPY)

DEPARTMENT OF PUBLIC HEALTH

CITY AND COUNTY OF SAN FRANCISCO

October 2, 1939.

Statement

Executive Order No. 188, involving Department of Public Health procedure, namely, volunteer Wassermann blood tests for syphilis in all Emergency Hospitals on each Wednesday of each week, is herewith rescinded, and the practice discontinued. The reasons are as follows:

Since these tests have been instituted, 10,541 have been performed, the statistical results being attached hereto. It

* For item on California Medical Association Cancer Exhibit at Golden Gate Exposition, see page 348.

has been noted that the average number of weekly tests has fallen off to less than thirty per week. The main reason, however, for discontinuance of such blood tests in Emergency Hospitals is the new premarital examination state law. This state law requires a minimal physical examination and a blood test for syphilis. The many persons having only the results of the tests and not the physical examination and demanding, therefore, a marriage certificate of the County Clerk have so complicated the procedure under the new state law that it was thought best that the situation would be clarified accordingly by discontinuance of these volunteer blood tests.

Moreover, the deluge of California marriages into Nevada seems extraordinary and expensive if physical examinations and blood tests can be arranged with minimum complications.

The temporary elimination of this voluntary test is done with every regret, since the San Francisco Department of Public Health was the first in the United States to institute such a procedure for the control of syphilis in its Emergency Hospitals on a voluntary basis.

Under the premarital state law, go to your physician, or if you cannot afford the usual fee, go in San Francisco to established general hospital clinics.

J. C. GEIGER, M. D., *Director.*

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(COPY)

Wassermann Campaign Results

August 18, 1937, to September 27, 1939, Inclusive

Average number of tests taken weekly.....	95
Average percentage of tests showing positive results.....	7.7%
Average percentage of positives not previously tested nor recently treated.....	44%
Total number of tests taken to date.....	10,541

Subject: Diagnosis of Weil's disease.*

OFFICE OF DIRECTOR OF PUBLIC HEALTH
CITY AND COUNTY OF SAN FRANCISCO

October 17, 1939.

To the Editor:—I am attaching hereto copy of an executive order in connection with the diagnosis of Leptospirosis (Weil's disease and Canicola fever).

Sincerely,

J. C. GEIGER, M. D., *Director.*

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(COPY)

CITY AND COUNTY OF SAN FRANCISCO
DEPARTMENT OF PUBLIC HEALTH

October 11, 1939.

Executive Order No. 237

The Diagnosis of Leptospirosis (Weil's Disease and Canicola Fever)

It is felt that the diagnosis of leptospirosis is of definite significance, particularly to epidemiologists, city physicians, surgeons in the Emergency Hospitals and others of the medical staff of the Department of Public Health. Therefore, those working in the fields noted should read this Executive Order and refer to it when occasion arises.

The following clinical symptoms are of significance in the diagnosis of icteric or anicteric leptospiral infections:

(a) Acute onset, fever, headache, feeling of severe illness; definite symptoms of an acute infectious disease.

(b) Muscular pains, occurring spontaneously and when pressure is applied, localized in the thighs, calves and back;

* See also article on page 294.

in about 80 per cent of the cases, characteristic redness of the conjunctivae.

(c) Liver symptoms: jaundice, bilirubinuria, urobilinuria; occasionally cholemia. Even in the absence of jaundice, van den Bergh indicates an increased bilirubin content of the serum, thus an increased destruction of red blood corpuscles and hepatic damage.

(d) Kidney symptoms: mild and severe nephritis, although observed in many infectious diseases, is always noted and transition stages to the symptoms of hemorrhagic nephritis are frequent in severe cases. The urea content of the blood without edema or hypertension is definitely increased.

(e) During the first week a low blood pressure with a weak and rapid pulse is worth noting.

(f) A marked deviation to the left of Arneeth's formula, accompanied by a decrease of blood platelets, is apparent.

(g) Infections progressing as typical meningitis should be suspected as leptospirosis. It is important to realize that all symptoms suggesting *Weil's disease* may be absent. If the patient's medical history gives no suggestions, such as no water accidents, no swimming, no occupations bringing him into contact with rats or no exposure to dogs, a laboratory investigation (serum test or examination of the urine) by properly qualified workers is the only means revealing the true nature of the disease.

(h) Epidemiological information (swimming, fishing, working in sewers, etc.), may be of great importance. In recent years evidence has come to light that dogs are occasionally sources of infection. Canines infected with the classical rat or the specific dog leptospira may infect children and members of a household in which an animal with leptospirosis is kept.

Laboratory investigations are of greatest importance in order to differentiate the diverse forms of jaundice, in particular the sporadic cases of epidemic catarrhal jaundice. From a social point of view, an accurate diagnosis is imperative since the disease, when contracted as in the case of sewer workers, fishermen, butchers, is regarded as an occupational accident and, therefore, compensable by law.

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Prepared by Dr. K. F. Meyer, Director, Hooper Foundation for Medical Research, University of California.

J. C. GEIGER, M. D., *Director.*

Subject: Service of Out-Patient Department: University of California Hospital.

October 18, 1939.

To the Editor:—I am attaching a letter which we have received from a farmer in the country, which I think is a very significant document. It goes right to the heart of social medicine.

I thought you might like to see it, and Doctor Porter suggested that I forward it to you for your consideration. If you think it has any news value and you wish to use it in the JOURNAL, we would have no objections; if not, return it, and no harm done.

Sincerely yours,

OUT-PATIENT DEPARTMENT.

W. E. Carter, M. D., *Director.*

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(COPY)

Vacaville, California, October 15, 1939.

U. C. Hospital
San Francisco, California

Dear Sirs:

I am a small farmer. I have thirty acres with a nice home on it, and for eleven years I have had to work outside